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TRANSMITTAL  
FORM

(to be used for all correspondence after initial filing)

		Application Number	10/717,123
		Filing Date	November 19, 2003
		First Named Inventor	Carl M. Edwards
		Art Unit	2862; Confirmation No.: 7299
		Examiner Name	N/A
Total Number of Pages in This Submission	3	Attorney Docket Number	584-26801-US

ENCLOSURES (Check all that apply)			
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Group	
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences	
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)	
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information	
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter	
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please Identify below):	
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<input checked="" type="checkbox"/> Supplemental Information Disclosure Statement	<input type="checkbox"/> Request for Refund		
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____		
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<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53			
Remarks			
The Commissioner is hereby authorized to charge any additional fees or credit any overpayments to Deposit Account No. 02-0429 (584-26801-US)			

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Kaushik P. Sriram, Reg. No. 43,150		
Signature			
Date	June 28, 2004		

## CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name	Beth Pearson-Naul		
Signature			
	Date	June 28, 2004	

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

APPLICANT: Carl M. Edwards  
SERIAL NO.: 10/717,123  
FILED: November 19, 2003  
TITLE: "Azimuthal NMR Imaging of Formation Properties From a Wellbore"

§ Group Art Unit: 2862  
§  
§ Examiner: Not Assigned  
§  
§ Confirmation No.: 7299  
§  
§ Atty Docket No.: 584-26801-US

MS: DD  
Commissioner for Patents  
P. O. Box 1450  
Alexandria, Virginia 22313-1450

## **SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT**

Dear Sir:

In compliance with the duty of disclosure under 37 C.F.R. § 1.56, it is respectfully requested that this Information Disclosure Statement be entered and the references listed on the attached Form PTO-1449 be considered by the Examiner and made of record.

This Information Disclosure Statement is not to be considered as a representation that a search has been made or that no other material information as defined under 37 C.F.R. § 1.56(a) exists. The information disclosure statement submitted herewith is being filed before the mailing date of the first office action for this application.

The Commissioner is hereby authorized to charge any additional fees or credit any overpayment to Deposit Account No. 02-0429 (584-26801-US).

Respectfully submitted,

Dated: June 28, 2004

Kaushik P. Sriram, Reg. No. 43,150  
Madan, Mossman & Sriram, P.C.  
2603 Augusta, Suite 700  
Houston, Texas 77057  
Telephone: (713) 266-1130  
Facsimile: (713) 266-8510

**CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8(a)**

I hereby certify that this paper, along with any referred to as being attached or enclosed, is being forwarded to MS DD, Commissioner for Patents, Alexandria, Virginia 22313-1450, via the United States Postal Service, First Class Mail, prepaid on the 28th day of June, 2004.

4. By: Beth Pearson-Naul  
Beth Pearson-Naul



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SHEET 1

OF 1

		ATTY. DOCKET NO.	SERIAL NO.
		584-26801-US	10/717,123
<b>SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT</b>		APPLICANT	
		Carl M. Edwards	
(Use several sheets if necessary)		FILING DATE	GROUP / CONFIRMATION
		November 19, 2003	2862 / 7299

## U.S. PATENT DOCUMENTS

*EXAMINER INITIAL		DOCUMENT NUMBER	DATE	NAME	CLASS	SUBCLASS	FILING DATE IF APPROPRIATE
	AA	3,124,741	03/64	J. J. Primas	325	.5	04/62
	AB	4,307,343	12/81	Likes	324	307	08/79
	AC	6,291,995	09/01	Speier et al.	324	303	11/98
	AD	6,429,654	08/02	Itskovich et al.	324	314	09/00
	AE						
	AF						
	AG						

## FOREIGN PATENT DOCUMENTS

		DOCUMENT NUMBER	PUBL. DATE	COUNTRY	CLASS	SUBCLASS	TRANSLATION YES NO
	AH						
	AI						
	AJ						

## OTHER DISCLOSURES (Including Author, Title, Date, Pertinent Pages of Publication, Etc.)

AK	
AL	
AM	

EXAMINER

DATE CONSIDERED

\*EXAMINER: Initial if citation considered, whether or not citation is in conformance with MPEP 609. Draw line though citation if not in conformance and not considered. Include copy of this form with next comment to applicant